

TELEFAX TRANSMISSION

DATE: 2-3-04
TO: Wynette
FAX NO: 571-273-1626
TOTAL PAGES: (Including this one) 2
REGARDING: SN 09/913,364

BEST AVAILABLE COPY

*Here is the change of address
form as requested.*

Thank you

FROM:

Mary Ann Capps
Signature

RECEIVED

FEB 03 2004

ROBERT W. BECKER & ASSOCIATES
707 Highway 66 East, Suite B
Tijeras, NM 87059
Telephone: (505) 286-3511
Facsimile: (505) 286-3524

Technology Center 2800

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS ATTORNEY PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, OR AN EMPLOYEE OR AGENT OF THE INTENDED RECIPIENT RESPONSIBLE FOR DELIVERING THIS MESSAGE TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION, OR COPYING OF THIS MESSAGE IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA UNITED STATES MAIL.

BEST AVAILABLE COPY

PTO/SB/22 (10-01)

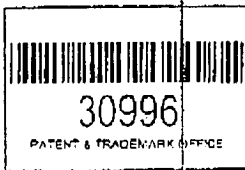
Approved for use through 10/31/2002, OMB 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS <i>Application</i> Address to: Assistant Commissioner for Patents Washington, D.C. 20231	Application Number	09/913,364
	Filing Date	August 10, 2001
	First Named Inventor	Michael Klement
	Art Unit	2836
	Examiner Name	Greg Toatley
	Attorney Docket Number	Klement1

Please change the Correspondence Address for the above-identified application to:

☐ Customer Number 000030996 

Type Customer Number here

OR

<input type="checkbox"/> Firm or Individual Name	ROBERT W. BECKER & ASSOCIATES				
Address	707 HIGHWAY 66 EAST, SUITE B				
Address					
City	TIJERAS	State	NM	ZIP	87059
Country	USA				
Telephone	(505) 286-3511	Fax	(505) 286-3524		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- ☐ Applicant/Inventor.
- ☐ Assignee of record of the entire interest.
- ☐ Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or Agent of record.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name

ROBERT W. BECKER

Signature



Date

DECEMBER 12, 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

☐ Total of _____ forms are submitted.

Burden - our Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

RECEIVED

FEB 03 2004

Technology Center 2800